

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	213518477		
1.) CORPORATION NAME: <span style="float: right;">DUE DATE: <b>4/30/2013</b></span> <b>The Software Defined Radio Forum, Inc.</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM</b> <b>4701 COX RD STE 301</b> <b>GLEN ALLEN, VA</b>		SCC ID NO: <b>F1892662</b>  5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED			
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>				
4.) STATE OR COUNTRY OF INCORPORATION: <b>CA</b>				
6.) PRINCIPAL OFFICE ADDRESS:  <div style="text-align: center;">             ADDRESS: 12100 SUNSET HILLS RD.              #130               CITY/ST/ZIP: RESTON, VA 20190           </div>				
7.) DIRECTORS AND PRINCIPAL OFFICERS: <span style="float: right;">All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</span>				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK R. TURNER TREASURER 1680 UNIVERSITY AVE. ROCHESTER, NY 14610	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT SCHULTZ DIRECTOR 3055 ENTERPRISE CT. VISTA, CA 92081	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LEONARD G. PUCKER, II CEO 12572 17A AVE. SURREY, BC V4A9H9-CANADA , , FN	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Bruce Oberlies Board Chair 1301 E. Algonquin Road Schaumburg, IL 60196	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Ruediger Leschhorn VICE PRESIDENT Muehldorfstr 15 Muenchen, 81671, DE	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN GLOSSNER CTO 6 BICENTENNIAL DR NASHUA, NH 03062	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		

NAME:	KUAN COLLINS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	10745 ESMEALDAS DRIVE		
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92124		
NAME:	MANUEL UHM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CMO		
ADDRESS:	1120 S. CAPITAL OF TEXAS HWY		
CITY/ST/ZIP/CO:	AUSTIN, TX 78746		
NAME:	KEITH NOLAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CRO		
ADDRESS:	DUNLOP ORIEL HOUSE		
CITY/ST/ZIP/CO:	DUBLIN, 00002, IE		
NAME:	DAVID RENAUDEAU	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	160 BOULEVARD DE VALMY		
CITY/ST/ZIP/CO:	COLOMBES CEDEX, 92704, FR		
NAME:	CLAUDIO ARMANI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	VIA PIERAGOSTINI 80		
CITY/ST/ZIP/CO:	GENOVA, 16151, IT		
NAME:	PETER STANFORTH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1064 GREENWOOD BLVD		
CITY/ST/ZIP/CO:	LAKE MARY, FL 32746		
NAME:	R. MURALIDHARAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	42 OFF SAKI VIHAR ROAD		
CITY/ST/ZIP/CO:	MUMBAI, 400072, IN		
NAME:	JAMES NEEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	147 MILL RIDGE RD		
CITY/ST/ZIP/CO:	STE 212 LYNCHBURG, VA 24502		
NAME:	GERD ASCHEID	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	TEMPLEGRABEN 55		
CITY/ST/ZIP/CO:	AACHEN, 52056, DE		
NAME:	HIROSHI HARADA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3-4 HIKARINO-OKA		
CITY/ST/ZIP/CO:	YOKOSUKA, 239-0847, JP		
NAME:	VINCE KOVARIK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4497 PINEWOOD RD		
CITY/ST/ZIP/CO:	MELBOURNE, FL 32934		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			

/s/ LEONARD G. PUCKER, II	LEONARD G. PUCKER, II, CEO	4/18/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		